

**PATENT APPLICATION FEE DETERMINATION RECORD**

Effective October 1, 2003

Application or Docket Number

*EMSE 34180052*

**CLAIMS AS FILED - PART I**

(Column 1)		(Column 2)	
TOTAL CLAIMS		<i>55</i>	
FOR		NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS		<i>55</i> minus 20 =	<i>35</i>
INDEPENDENT CLAIMS	<i>10</i>	minus 3 =	<i>7</i>
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>	

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1)		(Column 2)		(Column 3)	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	* <i>Signed</i>	Minus	**	=
Independent					<input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>

SMALL ENTITY TYPE	OTHER THAN OR SMALL ENTITY
RATE	RATE
BASIC FEE	BASIC FEE
X\$ 9=	X\$18=
X43=	X86=
+145=	+290=
TOTAL	TOTAL
OR	OR

*630  
607  
0  
207*

SMALL ENTITY OR	OTHER THAN SMALL ENTITY
RATE	RATE
ADDI- TIONAL FEE	ADDI- TIONAL FEE
X\$ 9=	X\$18=
X43=	X86=
+145=	+290=
TOTAL ADDT. FEE	TOTAL ADDT. FEE
OR	OR

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
Total	* <i>Signed</i>	Minus	**	=	X\$ 9=	<input type="checkbox"/>	X\$18=	<input type="checkbox"/>
Independent	* <i>Signed</i>	Minus	***	=	X43=	<input type="checkbox"/>	X86=	<input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
Total	* <i>Signed</i>	Minus	**	=	X\$ 9=	<input type="checkbox"/>	X\$18=	<input type="checkbox"/>
Independent	* <i>Signed</i>	Minus	***	=	X43=	<input type="checkbox"/>	X86=	<input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.